Statement of Organization - Candidate Committee Use this form to create a new or update an existing candidate committee.

Amendment Yes Yes ☐ No

This form must be accompanied by forms CRO-3100 and C	RO-3500 (when amer	nding, only re-submit if applicable).	
1. Committee Information			
a. Full Name	RFCF	c. ID Number	
Committee to Elect Jim Von	CANON 1		
b. Mailing Address (include City, State and Zip Code)	MAR 0	d. Date Organized	
PO BOX 129	11	12/15/2021	
LAKEVIEW NC 28350	MOOR	EBO Phone Number 910 691 5130	
2. Candidate Information		Candidate's Primary Committee	
a. Full Name	e. Candidate ID Numb		
JAMES RICHARD VON GNOW JR) 	REPUBLICAN (Indicate Non-partisan if applicable)	
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought		
PO BOX 129 LAKENIEW NC 28352	DISTRICT 1.	County Commissioner	
c . Phone Number d. Email Address	h. Next Election Year	i. Jurisdiction	
910 691 5130 SFBEIOREAN Q GMAIL.CO	M 2022	DISTRICT 1.	
Email copy of notices	2022	DRIMICI L.	
3. Treasurer Information	4. Custodian of Bo	oks Information	
a. Full Name BRAWLY	a. Full Name		
BRHDLAY BICK	KIMBORLEY WON CANON		
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (in	b. Mailing Address (include City, State, and Zip Code)	
210 CHSHEW LOOP	PO 180x 129		
C4MERGN NC 28326	LAKEVIEW NC 28350		
c. Phone Number d. Email Address		d. Email Address	
960 638 5959 FLOREN 31118 OGMAIL. ON			
	o Email copy o		
5. Assistant Treasurer Information	6. Account Information (incl. CRO-3500) Add		
a. Full Name	a. Financial Institution Full Name		
JAMES RVON CHNON TR	FIRST BANK		
b. Mailing Address (include City, State, and Zip Code)	b. Purpose	RECEIVE	
LAKE VIEW NC 28350		a 4 2022	
c. Phone Number d. Email Address	c. Account Code	d. Type	
9106915130 SFDELOREAN & GMAIL.CO	1	MOOREBO	
E-Email copy of notices CERTIFICATION	1	MOURED	
	all applicable provis	ions of Article 22 A 22B & 22D 22M of	
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds.			
I further certify that this report is complete, true and correct.			
Brady Dich Brollydle 2-25-22			
Printed'Name of Signer Signature of Appointed Treasurer Date			

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